State of California ABC-281 10/99

License Type: 34 One Day Beer & Wine License Nontransferable

LICENSE NO. 9537637

933/03/

Receipt No.

2511141 \$50.00

Fee Paid Geographi

Geographical Code 1933

APPLICATION:

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION:

HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE

LOCATION ADDRESS:

6000 SANTA MONICA BLVD LOS ANGELES, CA 90038

TYPE OF EVENT:

OTHER EVENT

HR/DATES DURING WHICH

July 21, 2018

ALCOHOL WILL BE SOLD:

6PM-12AM

ESTIMATED ATTENDANCE:

3250

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU

6000 SANTA MONICA BLVD LOS ANGELES, CA 90038

LICENSE:

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.



Good for 1 day(s). Date Issued July 9, 2018.

Director of Alcoholic Beverage Control

By

LS

Department of Alcoholic Beverage Control							State of California		
DAILY LICENS	E APPLIC	ATION/AUT	HORIZA	TION - N	lon Transf	erable	Edn	nund G. Brown Jr., Governor	
DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit http://www.abc.ca.gov/distmap.html Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.							CLICENSE NUMBER 9537637 RECEIPT NUMBER 9511141 FEE \$50		
1. ORGANIZATION'S NAME	***************************************				CONDITIONS REQU	JIRED	DIAGRAM REQUIRED		
Hollywood Forever Inc Endowment Care & Memorial Care					Yes	No	Yes	No	
2. LICENSE TYPE		riate license typ	e AND organ	nization typ	e)				
a. Daily Genera		(Includes bee		listilled spir					
Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure Fraternal Organization is with Regular Membersh								Five Years	
Organization Formed for Specific Charitable or Civic Purpose Religious Organization									
Other:	Other:						Vessel per Section 24045.10 B&P (\$50.00)		
-	Beer (\$25.00				& Wine (\$50.	00)	Special Da	ily Wine (\$25.00)	
Charitable	Fraternal	Social	Politic		Other:		All March of Bloody	Industry South	
Civic	Civic Religious Cultural Amateur Sports Organization						NUMBER OF DISPENSING POINTS 1		
c. Special Tem	porary Licens	e (\$100.00)	(Differ	rent privileg	es depending	on statute)			
Nonprofit (Corporation per	ction 24045.2 or Sections 2404 Licenses, per S	5.4 and 2404		Women's	-	Wine Sale per Section Mine Sale per Section Organication Organication		
License num	ber			Amount \$	5				
3. EVENT TYPE Dinner	Dance	Wedding	Lunch	Picnic	Barbeque		al Gathering	Festival	
Sports Event	Concert	Birthday	Mixer	Carniva	LJ			screening	
4. TOTAL # OF DAYS	5. ESTIMATED ATT	ENDANCE	From	6:00pm	ERAGE SALES, SER	VICE AND/OR CONS	12:00am		
7. EVENT DATE(S)					8. EVENT IS OPEN				
Saturday 07.21.20 9. EVENT LOCATION (Give			and situ)		Yes	_ No			
Hollywood For	ever Ceme	tery - 6000	Santa Mo	nica Blv			0038		
10. LOCATION IS WITHIN T	No	11. TYPE OF ENTER		FRIDAY	12. SECURITY GU	JARDS No	If yes, how	v many? 25	
13. AUTHORIZED REPRESENTATIVE'S NAME Jay Boileau							14. REPRESENTATIV	/E'S TELEPHONE NUMBER	
15. REPRESENTATIVE'S A 6000 Santa Monica		olon CA 00039							
16. ORGANIZATION'S MAI									
17. AUTHOBITED RESENTATIVE'S SIGNATURE							18. DATE SIGNED 06.21.2018		
PROPERTY OWNER APPR	OVAL BY (Name), R	EQUIRED	PHONE NUMBE	R		TY OWNER SIGNAT	URE	DATE SIGNED	
Yogu Kanthiah	ROVAL BY (Name).	F APPLICABLE	PH(CHICAL PHACE)			HUGS CHU FORCEMENT SIGNA	TURE /	06.21.2018 DATE SIGNED	
11-#3	7467 -	Hous Con T	3			11#	39467	6.22.2c	
DISTRICT OFFICE APPRO	VAL BY (Name)	1	The same of	SERVISION STATE	ABC FM	PLOYEE SIGNATUR	E	ISSUANCE DATE	

The above-named organization is hereby licensed, pursuant to the California Business and Professions Code Division 9 and California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above named location for the period authorized above. This license does not include off-sale ("to-go") privileges. include off-sale ("to-go") privileges.

This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace and morals of the people of the State. JUN 2 2 2018

ABC-221 (rev. 01-11)